

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MA</i>	<i>70891</i>	<i>6/24</i>
O.I.P.E. CLASSIFIER		<i>12</i>	<i>6-29-00</i>
FORMALITY REVIEW		<i>6785</i>	<i>8-21-00</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

..... Rejected      N ..... Non-elected  
 ..... Allowed      I ..... Interference  
 (Through numeral)..... Canceled      A ..... Appeal  
 ..... Restricted      O ..... Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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